

Lactation Support Services

Cost/Benefit Rationale

- Breastfeeding rates for women on Medicaid in NC are well below the Healthy People 2020 goals. A primary reason for this disparity is that women get discouraged and stop breastfeeding when problems develop and they do not have access to care providers who offer lactation services.^{1,2} Medical lactation services are not currently covered by Medicaid in NC.
- The availability of lactation support services, particularly when provided by highly qualified International Board Certified Lactation Consultants (IBCLCs) is intended to bring North Carolina's rates up to the national goals. If this occurs, the benefits in terms of reduced infant/early childhood mortality and morbidity, as well as reduced medical care costs would be significant.

Breastfeeding Goal	Healthy People 2020 Target	2011 NC WIC Rates (proxy for Medicaid numbers) *
Initiation	81.9%	63%
6 Months	60.6%	23.2%
12 Months	34.1%	18.1%

- A systematic review and meta-analysis on breastfeeding and infant/early childhood outcomes concludes that breastfeeding reduces Sudden Infant Death Syndrome, gastrointestinal infection, upper and lower respiratory disease and hospitalization, childhood leukemia, asthma, otitis media, childhood obesity and diabetes mellitus. Breastfeeding also lowers maternal risk of breast and ovarian cancer, hypertension, and other metabolic diseases.^{3,45}
- Current computer system difficulties prevent the direct use of NC Medicaid diagnostic and cost data. However the Agency for Healthcare Research and Quality has done studies on the benefits of breastfeeding,⁶ and the results of these studies can be extrapolated to the NC Medicaid population.
- Such an extrapolation indicates that, if the NC Medicaid breastfeeding rates rise to the Healthy People 2020 goals, 14-18 infant deaths would be prevented.⁷
- In addition to the inestimable benefit of averting infant deaths, significant cost savings to NC Medicaid would be attained. In fact, the case for covering lactation support services can be made in the savings from just three common and sometimes lethal infections in infancy: Lower Respiratory Tract Infections; Gastroenteritis; and Necrotizing Enterocolitis.

Condition	NC Medicaid Cases Averted	Estimated Cost Savings
Lower Respiratory Tract Infections	500	\$2.5 Million
Gastroenteritis	6,000	\$2.5 Million
Necrotizing Enterocolitis	10	\$2.1 Million
Total Cost		\$7.1 Million

Cost Calculation

North Carolina Births	120,000
Births Covered by Medicaid	61,200 (51%)
# of Women on Medicaid initiating breastfeeding (Assuming 80% initiation goal is met)	48,960
Estimated Number of women who need lactation support visit (Estimated at 75%)	36,720
Estimated number of lactation support visits (1.3 visits)	47,736
Estimate cost of visits (assuming \$100/visit)	\$4.77 Million

- Preliminary cost / benefits analysis indicates that coverage of lactation support services by NC Medicaid would not exceed \$4.77 million annually.
- Extrapolation from national research studies indicates that 14-18 infant deaths would be prevented and more than \$7 million in Medicaid expenditures would be saved.
- Given this cost savings, providing reimbursement for appropriate medical lactation care services for North Carolina Medicaid infants is a financially sound investment.

References

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